

EARLY CHILDHOOD SPECIAL EDUCATION ENDORSEMENT (ECSE)NORTH DAKOTA EDUCATION STANDARDS AND PRACTICES BOARD

SFN 58892 (07-2008)

Social Security Number	Date of B	irth	ND Teaching License	e Number					
Work Telephone Number									
·			Empil Address						
Home Telephone Number Last Name First N		First Name	Email Address	Email Address M.I. Maiden Name			<u> </u>		
Mailing Address			City		State	Zip	(9 digit)		
Prerequisite: Valid North Dakota educator's professional license in early childhood or elementary education. This endorsement enables the applicant to teach early childhood special education birth through grade three. Reeducation Plan: This endorsement will be issued one year at a time up to three years. Submit a plan of study for the three year period and submit copies of official transcripts annually for a review of plan progress.									
Fees: \$75 if adding this endorsement renewal time. Timeline: This endorsement must be childhood special education teacher in	complete	d prior to or within	three calendar years	of first	contracte	d em	ployment as an early		
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Early Childhood Special Education Program of Study 24 semester hours (SH) of coursework must be primarily at the graduate level from an approved teacher education program and verified through official transcripts. Effective July 1, 2009, applicant must meet or exceed Praxis II cut score for special education.									
Coursework				Comp	oleted (SI	H)	Needed (SH)		
Exceptional children and youth									
Assessment of preschool children with disabilities									
Child development									
Home and school relations or parents, the school, and community									
Characteristics of preschool children with disabilities									
Methods/materials in education of preschool children with disabilities									
Education of preschool children with disabilities									
				Total S	Н		Total SH		
Practicum working with preschool children with disabilities									
Signature of Applicant				Date					
				Poto					
ESPB Review				Date					
Executive Director, ESPB				Date					
License Code 19037		Type of Equivalency 23		Level of Preparation 15					
Plan on File Start Date:		Plan on File Expiration	n Date:	Plan on File Effective Date:					

Submit completed form and \$75 fee to: Education Standards and Practices Board

2718 Gateway Ave, Suite 303 Bismarck ND 58503-0585 (701) 328-9641 office (701) 328-9647 fax

In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to North Dakota Century Code (NDCC) 43-50-02. The individual's social security number is used by the Education Standards and Practices Board (ESPB) as an identification number for file control purposes, background checks, and recordkeeping. ESPB does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age or disability as required by various state and federal laws.



Payment/Credit Card Information

Type of Payment		Amount		
☐ Visa ☐ MasterCard ☐ Ch	neck	\$		
Name as it appears on credit card	Please sign to authorize credit card charge			
Credit Card Number	Expirati	on Date	3 digit CVV number on back of card	